

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BT</i>		9-14-99
O.I.P.E. CLASSIFIER			9-20-99
FORMALITY REVIEW	<i>SB</i>	#07033	9-23-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Available Copy

Claim	Final	Original	Date
1	✓	✓	5/14/01
2	✓	✓	1/13/02
3	✓	✓	7/23/02
4	✓	✓	12/10/03
5	✓	✓	8/05/04
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
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If more than 150 claims or 10 actions  
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